

HEADQUARTERS
AMERICAN GRAVES REGISTRATION SERVICE
PHILCOM ZONE

GRPZ 293

AFO 900
21 October 1949

SUBJECT: Unidentifiable Remains

TO: The Quartermaster General
Department of the Army
Washington 25, D. C.
ATTN: Memorial Division

1. In accordance with the provisions of your letter, file QMGMU 293, GRS (Far East), dated 17 September 1948, subject: Resolution of Cases of Unidentified Deceased, the following Unknown remains, presently stored at AGRS Mausoleum, Manila, P.I., have been processed by the Central Identification Laboratory and considered "Unidentifiable" by reason of lack of sufficient identifying data:

UNKNOWN X-340	AGRS	Mslm	UNKNOWN X-1100	AGRS	Mslm
" X-599	"	"	" X-1119	"	"
" X-729	"	"	" X-1725	"	"
" X-994	"	"	" X-2591	"	"

2. Forwarded herewith, for your consideration, are new QMC Forms 1044 for the above-mentioned Unknowns.

FOR THE COMMANDING OFFICER:

8 Incls
QMC Forms 1044 w/Certificates
of Unidentifiability

/s/ John Shypula
JOHN SHYPULA
1st Lt., Infantry
Adjutant

70
AIRMAIL

CONFIDENTIAL
FOR THE USE

Ident

20 September 1948

SUBJECT: Identification of World War II Personnel

**TO: Commanding General
Philippine Command
APO SFV, c/o Postmaster
San Francisco, California
ATTN: AGHS, PHELGIN LORE**

1. Reference is made to GPO Form 1044, with certification of unidentifiability, for the following unknown remains now stored in the AGHS Warehouse, Manila, P.I.:

Unknown 2-000

Unknown 2-000 Fragmentation (S (formerly Unknown 2-000-4, AGHS Warehouse, Manila, P.I.); previously labeled as Unknown 2-000, 1100 Fragmentation (S K, S.))

2. There is no record of Unknown 2-000 on file in this office. Subject case is being suspended by this office pending receipt of Report of Storage for subject remains.

3. One of Unknown 2-000-4 AGHS Warehouse, Manila, P.I., was reviewed and this office approved the classification of subject remains as unidentifiable in letter to your headquarters dated 26 April 1948. Copy of letter is attached.

FOR THE QUARTER MASTER GENERAL:

1 Incl
Copy for AGS HQ San Francisco

T. K. REY
Lt. Colonel, AGS
Memorial Division

J. Miller
Major
JH
cc-Administrative Section
cc-Circle

AIRMAIL

X 293 Mark P1 X-340
RRS Mark P1

1 /CSV	1st Interred 25 Oct 1949 A 13 59 Ft McKinley <i>Carroll Mark</i> CARL R. H. MARK Cemetery Superintendent		DISINTERMENT DIRECTIVE	
	SECTION A - NAME AND BURIAL LOCATION OF DECEASED		DIRECTIVE NUMBER 7747 00007	DATE 15 05 48 DAY MONTH YEAR
NAME UNKNOWN		SERIAL NUMBER X-000018	RANK	ARM O
CEMETERY USAF CEMETERY (MANILA NO 2)				DATE OF DEATH DAY MONTH YEAR DISPOSITION OF REMAINS O 7701 80 CODE DIST. PT.
PLOT 1	ROW 8	GRAVE 1019	COUNTRY PHILIPPINE ISLANDS	
				CAUSE OF DEATH 6

SECTION B - CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE FORT MCKINLEY CEMETERY MANILA, PHILIPPINE ISLANDS	NAME AND ADDRESS OF NEXT OF KIN (BY ADMINISTRATIVE DECISION)
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SECTION C - DISINTERMENT AND IDENTIFICATION

NAME UNKNOWN X-18 UNKNOWN X-340 Maus.	SERIAL NUMBER	RANK	DATE OF DEATH 10 Feb 45	DATE DISTINTERRED 30 Sept 48
IDENTIFICATION TAG ON <input checked="" type="checkbox"/> REMAINS <input type="checkbox"/> MARKER	ORGANIZATION		RELIGION	IDENTIFICATION VERIFIED BY W. A. MULLINS Embalmer NAME AND TITLE

SECTION D - PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL Shelter Half	CONDITION OF REMAINS Skeletal
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OTHER MEANS OF IDENTIFICATION

MINOR DISCREPANCIES I

Two (2), Maus. Tags UNK X-340

REMAINS PREPARED AND PLACED IN CASKET

DATE 30 Sept 48	BY W. A. MULLINS
CASKET SEALED BY W. A. MULLINS	EMBALMER (Signature) s/ W. A. Mullins
CASKET BOXED AND MARKED DATE 30 Sept 48 BY WEYMAN L MCGUIRE, SGT, MC	SHIPPING ADDRESS VERIFIED BY HONORIO V AURELIO, 1st Lt., Inf.

I hereby certify that all the foregoing operations were conducted and accomplished under my immediate supervision and that the report above is correct.

PLOT A, ROW 13, GRAVE 59, FORMERLY OCCUPIED
BY 1ST LT ROBERT E. BROOKEY, O-2058692, s/ Honorio V Aurelio, 1st Lt., Inf.
WHO WAS DISINTERRED AND SHIPPED TO ZI.

SIGNATURE OF GRS INSPECTOR

1 Prepare Discrepancy Report QMC Form 1194a for major discrepancies.

HEADQUARTERS
AMERICAN GRAVES REGISTRATION SERVICE
PHILCOM ZONE

12 Sept 1949

Date

SUBJECT: Unidentifiable Remains

TO : The Quartermaster
Washington 25, D. C.
Attn: Memorial Division

The records pertaining to Unknown X- 18, Flot 1,
Row 8, Grave 1019, USMC USAF Cem Manila #2 have
been reviewed and it is the opinion of this office that insufficient
evidence is available to establish the identity of this deceased,
and that these remains should be classified as unidentifiable.

FOR THE COMMANDING OFFICER:


B. McNEEMAR
Captain, QMC
Chief, Records Branch

Atch: Form 1044

Received 10-11-49
Not identifiable from
information presently
available 0000

Samborn, T.
10-11-49

IDENTIFICATION DATA

1. REMAINS OF UNKNOWN: UNKNOWN X-340 (Formerly UNK X-18 Manila #2)			2. DATE OF REPORT 14 Sept 1949		
3. NAME OF CEMETERY	4. PLOT	5. ROW	6. GRAVE	7. DATE OF	
	801	K	3233	DISINTERMENT	REINTERMENT

PHYSICAL DESCRIPTION

8. ESTIMATED WEIGHT 115 lbs.	9. ESTIMATED HEIGHT 5' 3"	10. COLOR OF HAIR U T D	11. RACE Unknown
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12. GIVE DESCRIPTION OF ANY OFFICIAL IDENTIFICATION FOUND WITH REMAINS

NONE

13. GIVE DESCRIPTION OF TATTOOS OR SCARS ON BODY AND/OR SUCH INFORMATION OBTAINED FROM OTHER SOURCES

U T D

14. WAS BODY BURNED? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	TO WHAT EXTENT?
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15. WAS BODY MANGLED? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	TO WHAT EXTENT?
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16. DESCRIBE EVIDENCE OF HEALED FRACTURES AND BONE MALFORMATIONS

NONE

17. LIST EVERY ITEM OF CLOTHING, EQUIPMENT AND PERSONAL EFFECTS FOUND, SHOWING THE TYPE, COLOR, SIZE, MARKINGS, SERVICE, ETC. (If laundry marks are indistinct such notation should be made and specimen forwarded through channels for examination when facilities are not available in the area)

NONE

"UNIDENTIFIABLE"
"BY REASON OF LACK OF SUFFICIENT IDENTIFYING DATA"

18.

TOOTH CHART

	TOP VIEW	SIDE VIEW
MISSING TEETH: ALL TEETH MISSING THROUGH EXTRACTION (NOT THOSE FRACTURED OR DISPLACED BY RECENT WOUNDS) SHOULD BE "X" D OUT AND LABELED THUS:		
CROWNED TEETH: BLOCK IN SOLID AND CROWN OF TOOTH (LABEL GOLD, PORCELAIN, SILVER OR GOLD AND PORCELAIN), THUS:		
BRIDGE WORK: BLOCK IN SOLID AND CROWN OF TOOTH (LABEL GOLD BRIDGE, GOLD AND PORCELAIN BRIDGE), THUS:		
FILLINGS: DRAW FILLING ON TOOTH AS ACCURATELY AS POSSIBLE (BLOCK IN AND LABEL GOLD, SILVER, CEMENT), THUS:		
CARIES (Cavities): OUTLINE LOCATION AND SIZE OF CAVITY, SHADE IN THUS:		

	RIGHT								LEFT								
	8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8	
	← M a x i l l a r y M i s s i n g →																
Side Views																	Side Views
Top Views																	
	X		X		to	to	to	to	to	to	to	to			X		
	16	15	14	13	12	11	10	9	9	10	11	12	13	14	15	16	

Fractured

DENTURES (Plates): DRAW DIAGRAM OF RELATIVE SIZE AND SHAPE OF PLATE, BLOCK IN TEETH ATTACHED AND INDICATE RETAINING CLASPS ON NATURAL TEETH WITH THE WORD, "CLASP."

REMARKS: I1, L2, I4 and L5 are loose present with remains.

"UNIDENTIFIABLE"

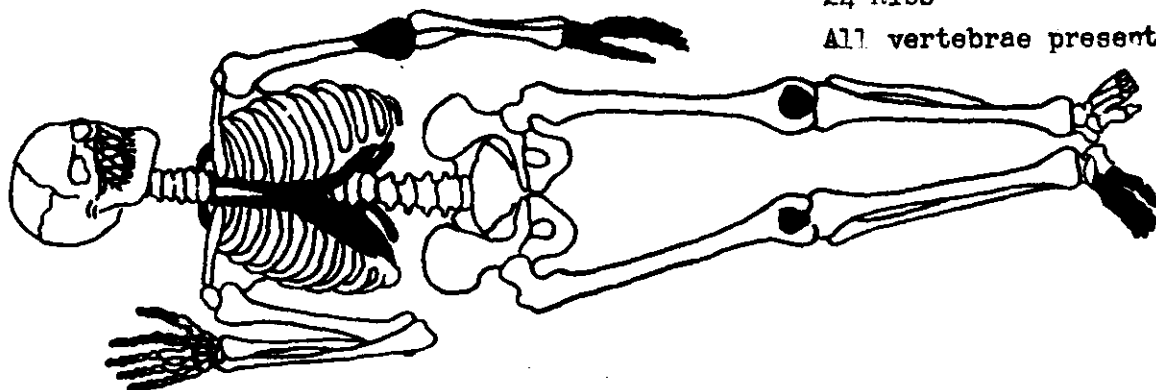
BY REASON OF LACK OF SUFFICIENT IDENTIFYING DATA

Paul R. Nichols

PAUL R NICHOLS
Chief, Identification Section

19. BLACK OUT PARTS OF BODY NOT RECOVERED

24 Ribs
All vertebrae present



20.

MASS BURIAL CERTIFICATE (IF APPLICABLE)
(Wherein segregation in whole or parts is impossible)

I CERTIFY THAT THE GROUP REMAINS CONSIST OF PARTS OF _____ DECEDENTS BASED ON THE PRESENCE OF ONE OR MORE OF THE FOLLOWING ANATOMICAL PARTS: _____ NUMBER

SIGNATURE OF MEDICAL OFFICER

21. REMARKS AND ADDITIONAL INFORMATION

No ROI, identification tags or personal effects found with remains.

Estimated weight of remains - 20 lbs.

Circumference of skull - 21½ inches.

"UNIDENTIFIABLE"

"BY REASON OF LACK OF SUFFICIENT IDENTIFYING DATA"

I CERTIFY THAT I HAVE PERSONALLY VIEWED THE REMAINS OF DECEASED AND THAT ALL RESULTING INFORMATION HAS BEEN RECORDED TO THE BEST OF MY KNOWLEDGE

TYPED NAME, GRADE, ARM OR SERVICE, AND ORGANIZATION

JAMES J. McDERMOTT
Laboratory Officer

SIGNATURE

James J. McDermott

Serial 11

IDENTIFICATION DENTAL CHART

TO BE USED WITH OMC FORMS NOS. 1042 & 1044 IN PLACE OF CHART THEREON,
AND TO BE ATTACHED TO AND FORWARDED WITH THESE FORMS WHEN ACCOMPLISHED.

UNKNOWN X-340 (Formerly X-18 USAF)

22 Sept 47
DATE

Cem Manila #2, Luzon, P.I.

Unknown

Unknown

LAST NAME FIRST INITIAL

RANK

SERIAL NO.

Unknown

Unknown

UNIT

ORGANIZATION

AGRS Mausoleum

Olongapo Area, Luzon, P.I.

Manila, P.I.

801

K

3233

PLACE OF DEATH

PLACE OF BURIAL

PLOT

ROW

GRAVE NO.

STORAGE

HANGER

BAY

CRYPT

Portion of Maxilla missing

			UPPER TEETH															
			RIGHT								LEFT							
			8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8
TYPE										P						P	O	
LOCATION																		

INSIDE — LOOKING OUT

			LOWER TEETH															
			RIGHT								LEFT							
			16	15	14	13	12	11	10	9	9	10	11	12	13	14	15	16
TYPE																		
LOCATION																		

KEY OF SYMBOLS TO BE USED ON ABOVE CHART

SYMBOLS IN WHOLE BOX		TYPE OF FILLING IN UPPER HALF OF BOX		LOCATION OF FILLING IN LOWER HALF OF BOX	
	EXTRACTED		AMALGAM (SILVER)		MESIAL (BETWEEN-TOWARD FRONT)
	CAVITY. INDICATE LOCATION		GOLD		OCCUSAL (BITING SURFACE BACK TEETH)
	FIXED BRIDGE (INCL. ABUTMENTS)		SILICATE OR PORCELAIN		DISTAL (BETWEEN-TOWARD BACK)
	TEETH REPLACED BY DENTURE		OXYPHOSPATE (CEMENT)		LINGUAL (TOWARD TONGUE)
	POSTHUMOUSLY MISSING (LOST AFTER DEATH)				FACIAL (TOWARD CHEEK)

—/fcl

IDENTIFICATION CHECK LIST

(To be completely filled out and attached to each copy
 of Report of Interment WD QMC Form 1042)

Unknown X-340 (Formerly X-18 USAF Cem
 Manila #2, Luzon, P.I.)
 Cemetery AGRS Mausoleum, Manila, P.I.
 Plot 801 HANGER BAY CRYPT Row Grave 3233

1. Arrived at cemetery _____
 (Hour) (Date)
2. Place of death Olongapo Area, Luzon, P.I.
 (Name of closest town) (Coordinates and letter Prefix, maps)

 (Sheet, scale and serials used)
3. Remains ~~interred~~ disinterred by C. M. T. #1, Manila Cem #2
 (Name and organization)
4. Evacuated to Cemetery by _____
 (Name and organization)
5. Description of clothing and equipment: (if clothes do not fit, obtain size from body measurements)

Item	Clothing Markings	Sizes	Indicate unusual markings color, wear, tear, repairs, etc.
* Headgear	(Type) /		
Raincoat	/		
Overcoat	/		
Jacket, Field	/		
Jacket, Combat	/		
Mackinaw	/		
Sweater		N	
Jacket, HBT		O N	
* Shirt, Wool OD		E	
Undershirt, Wool		/	
Undershirt, Cotton		/	
Trousers, HBT		/	
* Trousers, Wool OD		/	

Goatee / / (Light, color, extent)

Eyes U T (Color, setting, shape) Eyebrows (Color, bushiness, extent across nose)

Nose D / (Size, shape, straight) Ears (Size, set close to or far from head)

Mouth / / (Large, medium, small) Lips (Small, large, full)

Teeth **Dental chart attached** (White, size, unevenness, spacing, noticeable crowns, fillings, extracts)

Chin / / (Prominent, receding, pointed, dimples, double)

Jaw (Large, small, normal) Circumference of ~~head~~ **skull** in inches **21 1/2"** (Hat band)

Neck (Size, length, short, normal, wrinkled) Larynx (Prominent, normal)

Shoulders (Broad, straight/small, rounded) Arms (Length, muscular, color, extent and quantity of hair)

Hands

Fingers (Short, thick, long, slender, size of knuckles, missing fingers or joints)

(Unusual characteristics of fingernails)

Chest (Size of nipples, color, quantity and extent of hair, large, small, normal)

Waist (Size of navel, appendectomy, amount, quantity, and color of hair)

Back (Quantity and extent of hair) Circumcision (Yes-no) Pubic Hair (Color)

Hernioplasty (Yes-no/location)

Legs (Thick, muscular, knock-kneed, bowed, normal, quantity, color and extent of hair)

Feet (Size, corns, callouses, flat) Toes (Slender, straight, crooked, overlap)

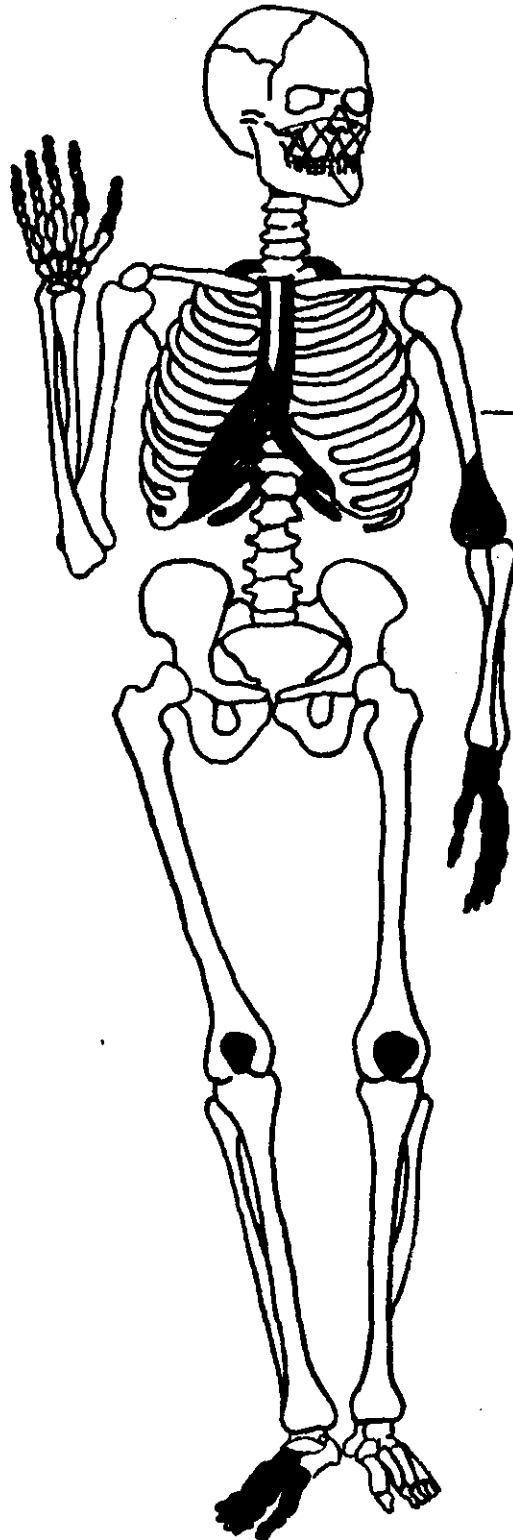
Evidence of healed fractures (Nose, arms, legs, etc.)

NOTE: Use attached charts "A" and "B" to indicate parts not received.

SKELETAL CHART

X-340

(BLACK OUT PARTS OF BODY NOT RECEIVED AT CEMETERY)



24 - Ribs

All vertebrae present

IDENTIFICATION DENTAL CHART

TO BE USED WITH QMG FORMS NOS. 1042 & 1044 IN PLACE OF CHART THEREON,
AND TO BE ATTACHED TO AND FORWARDED WITH THESE FORMS WHEN ACCOMPLISHED.

8 January 1947
DATE
















UNKNOWN X-18

LAST NAME	FIRST	INITIAL	RANK	SERIAL NO.
UNIT			ORGANIZATION	
Olongapo Area, Luzon, PI			USAF Cem. Manila #2	
PLACE OF DEATH	PLACE OF BURIAL	PLOT	ROW	GRAVE NO.
		1	8	1019

	8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8	
	RIGHT				UPPER TEETH						LEFT						
TYPE	X	X					X	X						X			TYPE
LOCATION																	LOCATION

	16	15	14	13	12	11	10	9	9	10	11	12	13	14	15	16	
	RIGHT				LOWER TEETH						ALL MISSING LEFT						
TYPE																	TYPE
LOCATION																	LOCATION

KEY OF SYMBOLS TO BE USED ON ABOVE CHART

SYMBOLS IN WHOLE BOX	TYPE OF FILLING IN UPPER HALF OF BOX	LOCATION OF FILLING IN LOWER HALF OF BOX
 EXTRACTED	 AMALGAM (SILVER)	 MESIAL (BETWEEN-TOWARD FRONT)
 CAVITY. INDICATE LOCATION	 GOLD	 OCCLUSAL (BITING SURFACE BACK TEETH)
 FIXED BRIDGE (INCL. ABUTMENTS)	 SILICATE OR PORCELAIN	 DISTAL (BETWEEN-TOWARD BACK)
 TEETH REPLACED BY DENTURE	 OXYPHOSPHATE (CEMENT)	 LINGUAL (TOWARD TONGUE)
 POSTHUMOUSLY MISSING (LOST AFTER DEATH)		 FACIAL (TOWARD CHEEK)

/abl

MAY 20 1948

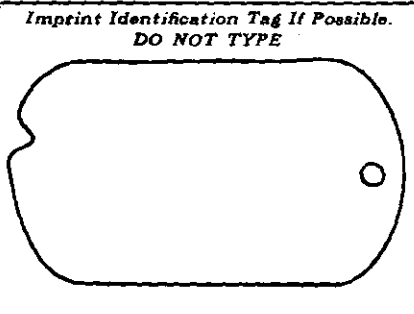
RESTRICTED

U 204

WD OMC FORM 1042
(Rev. 1 Apr. 1945)
(Supersedes GRS Form 1)

REPORT OF INTERMENT STORAGE
(AR 30-1810 and AR 30-1815)

DATE OF REPORT
2 October 1947



Section 1.—IDENTIFICATION.

NAME (Last, first, middle initial) UNKNOWN X-340 (Formerly X-18, USAF Cem Manila #2, Luzon, P. I.)		SERIAL No. Unknown
GRADE Unknown	ORGANIZATION Unknown	BRANCH OF SERVICE Unknown
RACE Unknown	RELIGION Unknown	IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY

PLACE OF DEATH Olongapo Area, Luzon, P. I.	CAUSE OF DEATH KIA - Severely burned-entire body	DATE OF DEATH 10 Feb 45
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EMERGENCY ADDRESSEE (Name, relationship, and address)
Unknown

IDENTIFICATION TAGS FOUND ON BODY (1, 2, or none) None	IF NO TAGS FOUND ON BODY, DESCRIBE MEANS OF IDENTIFICATION (If unidentified, fill in section 8 on reverse)
WERE SUBSTITUTE TAGS PROVIDED? (Yes or no) Yes (2)	

LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME
None

Section 2.—BURIAL. If other than in established cemetery, furnish sketch and map coordinates on reverse.

NAME, NUMBER, COORDINATES, AND LOCATION OF CEMETERY
AGRS MAUSOLEUM, MANILA, P. I.

DATE OF BURIAL 30 Sept 47	STORAGE STORAGE	HOUR 0900	BURIED IN (Shroud, blanket, or name of other) STORED Casket	TYPE OF GRAVE MARKER None	PLOT No. 801	ROW No. BAY K	GRAVE No. CRYPT 3233
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WAS THIS A REBURIAL? (Yes or no) Yes	RESTORED	IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE USAF Cem Manila #2, Luzon, P. I.	PLOT No. 1	ROW No. 8	GRAVE No. 1019
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TYPE OF RELIGIOUS CEREMONY	PERSON CONDUCTING BURIAL RITES	IF IDENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND CONTAINERS BURIED WITH BODY
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IDENTIFICATION TAG BURIED WITH BODY (Yes or no) Yes	STORED	IDENTIFICATION TAG ATTACHED TO MARKER (Yes or no) Yes
---	--------	---

BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial) STORED UNKNOWN X-355	RANK	SERIAL No.	ORGANIZATION	GRAVE No. CRYPT 3235
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BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial) STORED UNKNOWN X-352	RANK	SERIAL No.	ORGANIZATION	GRAVE No. CRYPT 3231
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SIGNATURE OF PERSON PREPARING REPORT Wm R GILBERT Adm Asst	SIGNATURE OF GRS OFFICER VERIFYING REPORT LUCIO S PANOFIO 2d Lt., INF.
--	--

DISTRIBUTION OF REPORT: Signed original for U. S. and allied dead, signed original and one copy for enemy dead, to the Quartermaster General through Headquarters GRS Officer. Copies for retention in theater as prescribed by theater commander.

RESTRICTED

606 483

REPORT OF INTERMENT
(ITM 10-630 AND AR 30-1815)

Not found

UNKNOWN - 10

(Last name) (First) (Initial) (Serial number) (Rank) (Organization)
 Clongapo Area, Luzon, P.I. 10 February 1945 KIA-Severely burned, entire
 (Place of death) (Date of death) (Cause of death) body
 1900 hrs. 14 May 1945 USM Cemetery Manila #2, P.I.
 (Time and date of burial) (Name of cemetery) (Name or coordinates of location)

DISBURIAL

1019 3 1 Cross Regulation
 (Grave number) (Row number) (Plot Number) (Type of marker—Regulation V-shaped or other)

Disposition of identification tags: Buried with body Yes No Attached to marker Yes No

Remains disinterred from Grave #150, USM
 Cemetery Clongapo #2, Tambales, Luzon, P.I.

(If no identification tags, what means of identification are buried with the body?)

Report of interment in battle buried with body.

Religion

(If no identification tags, but identity definitely established, give particulars)

Body buried on **RIGHT** BLUM, Carl H. 3457914 Pvt. Co F, 38th Inf 1020
 (Name) (Serial number) (Rank) (Organization) (Grave number)
 Body buried on **LEFT** WARRIN, Roger L. 3457637 S/1st, Co F, 152 Inf 1019
 (Name) (Serial number) (Rank) (Organization) (Grave number)

(Name and address of EMERGENCY ADDRESSEE)

(Name and address of LEGAL NEXT OF KIN)

List only personal effects **FOUND ON BODY** and disposition of same:

RE

RESTRICTED

Graves Reg. REPORT OF INTERMENT
Form No. 1 (TM 10-630 and AR 30-1815)
(Revised May 11, 1943)

UNKNOWN X-6

(Last Name) (First) (Initial) (Ser.No) (Rank) (Org.)

OLONGAPO AREA, LUZON P.I. 10 FEBRUARY 1945 KIA, SEVERELY BURNED, ENTIRE
(Place of death) (Date of death) (Cause of Death) BODY

1430 16 FEBRUARY 1945 USAF CEMETERY OLONGAPO NO 2, ZAMBALES, LUZON P.I.
(Time and date of burial) (Name of Cemetery) (Location)

150 8 1 REGULATION CROSS
(Grave number) (Row number) (Plot number) (Type of marker)

Disposition of identification tags: Buried with body: Yes No
Attached to marker: Yes No

1072

REPORT OF INTERMENT BURIED WITH BODY, XINC STRIP ATTACHED TO MARKER.
(If no identification tags, what means of identification are buried with body?)

Religion
(If no identification tags, but identity definitely established, give particulars)

Body buried on RIGHT UNKNOWN X-6 151
(Name) (ASN) (Rank) (Org) (Grave No.)

Body buried on LEFT DEAN, EARL K. 34937054 PVT CO B, 54th INF REGT, 149
(Name) (ASN) (Rank) (Org) (Grave No.)

(Name and address of EMERGENCY ADDRESSEE) (LEGAL NEXT OF KIN)

List only personal effects FOUND ON BODY and disposition of same: none found on body

RECEIVED
15 JUN 1945